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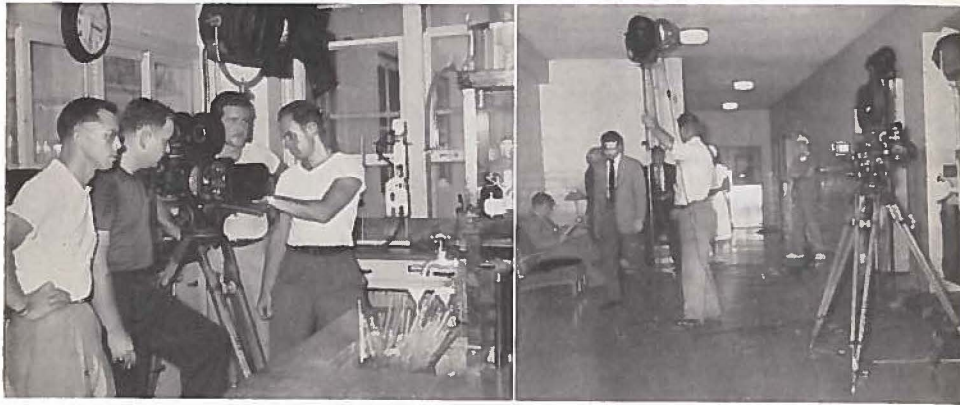
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# Hospital Passes Screen Test



**ON LOCATION**—Two of Louis De Rochemont's camera crews photographed scenes at the Hospital. Left, Director John Barnwell with Bill Morrison, Norman Dyrhrenfurth, and Johnson Potter in the chemistry laboratory; right, Director William Collieran sets up a scene in the maternity department.

**T**HE skilled medical care that The George Washington University Hospital gives its patients and the modern equipment it has available to help them to quick recovery are becoming known far beyond the boundaries of the city.

When the Reader's Digest-DeRochemont Corporation collaborated with the American Medical Association to make the motion picture, "M. D.—the U. S. Doctor," the film makers came to The George Washington University Hospital for some of the scenes they have used to illustrate highest standards for American hospitals.

The film is a picture report of the Nation's health and of the medical research that is being accomplished. It shows graphically the extent to which modern medicine is reaching all of our people.

The large establishment and excellent facilities of urban installation are contrasted with the limited but still very much up to date program of tiny one man clinics that serve rural areas.

Some of the more recent developments in the fight against disease are depicted—the use of steroids and hormones in cancer therapy, the search for polio vaccines and research in physical therapy techniques for polio sufferers, the use of antibiotics in the treatment of tuberculosis, the new mechanical heart, diabetes research, and the use of cortisone and adreno-cortico-tropic hormone (a hormone from the adrenal glands) therapy in rheumatoid arthritis.

The producer of the film, Louis de Rochemont is widely known for his motion picture pioneering and for his ever continuing interest in medical subjects—in doctors and doctoring.

"M. D.—the U. S. Doctor" is now near completion. Both collaborators are to be congratulated on bringing this venture to successful fruition, and The George Washington University Hospital is glad to have part in such a truly educational film—showing the skill of doctors and the modern facilities they have at hand in well equipped hospitals.

—DOROTHY BETTS MARVIN

# Two Alumni Receive Professional Awards

Both recipients of the District Medical Society's Certificates for Meritorious Service are graduates of the University's School of Medicine.

They are Dr. William J. Mallory, honored as an "eminent medical educator who has profoundly influenced the lives of a generation of physicians" and Dr. Charles Stanley White, "one of the city's leading surgeons" who has "distinguished himself in the field of medical education."

Acknowledging the awards at the Society's annual banquet, Dr. Mallory said "this is like champagne, it goes directly to the head and through the sympathetic nervous system it affects the heart causing an enlargement and a lifting up . . . In the words of Christopher Robin, 'I thank you very sweetly.'"

Dr. White modestly credited the award to his chromosomes, his parents, and his medical professors, mentioning Drs. W. P. Carr, James Carroll, W. W. Johnston, A. F. A. King, John D. Nichols, D. W. Prentiss, Walter Reed, E. A. Schweinitz, D. K. Shute, and J. Ford Thompson.

## Dr. Beachley Appointed To Public Health Board

Dr. Ralph G. Beachley, adjunct professor of public health practice in the School of Medicine, was, in November, approved as one of the Founders' Group of the new Board of Preventive Medicine and Public Health. The speciality board was established this year by the American Medical Association and the American Public Health Association to issue certificates of special knowledge in preventive medicine and public health to physicians accredited in these fields.

Dr. Beachley is director of public welfare and health in Arlington County. He was graduated from the University Medical School in 1920.



**PURLING FOR YOU**—Mrs. Dolly Gann is one of the Women's Board members who knit for the Hospital gift shop's glass shelves.

These shelves are now loaded with medium and low priced merchandise, ranging from practical goods to collector's items and attractively wrapped for Christmas giving.

Shoppers will find here a variety of men's toiletries, knitted articles and toys made by members of the Women's Board, Xmas tree balls decorated with names, table trees, and the popular ribbon candy. Cards, boxed and single, are for sale, and orders for flowers and fruit baskets are being taken as usual.

## Bibles Are Given

A gift of 100 Bibles for patient's rooms and 25 white testaments for nurses was made to the Hospital by the Washington Camp of The Gideon's. Mr. Charles C. Piepgrass, University alumnus and president of the Washington Camp, made the presentation.



# Babies in View

By PRESTON A. McLENDON, M.D. Professor of Pediatrics, School of Medicine,  
Chief of Pediatrics, University Hospital

JOHN PARKS, M. D. Professor of Obstetrics and Gynecology, School of Medicine,  
Chief of Obstetrics and Gynecology, University Hospital



**TOGETHER**—Mother Evelyn Hyett holds Baby Lawrence Andrew close as they come through the double doors from the delivery rooms. Three days later Nurse Jean Fryer teaches Mrs. Hyett the latest method in diaper changing, and dad, W. F. Hyett, dons a robe and mask to visit with his son.

**H**AVE you seen a new baby recently? Have you had the pleasant privilege of watching one of these lovable little creatures unfold as a new personality? If you are a new mother, a father, or even a visitor, the opportunity is yours at The George Washington University Hospital to see and learn a lot more than ever before about babies.

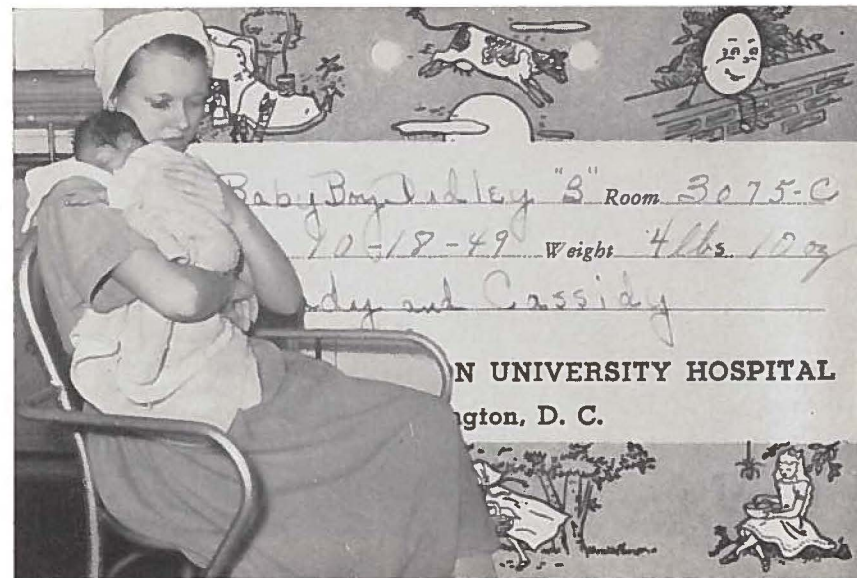
Curtains are rarely drawn across the many picture windows which permit a continuous view into the nurseries. While visitors are not permitted in the same room with the babies, they can see them from all sides. Nose and finger prints of proud parents and relatives are welcomed on the view windows of the nurseries.

In the early part of this century only seriously ill or homeless mothers were admitted to hospitals. Since many of these sick mothers were incapable of caring for their infants the system of having a separate nursery arose. Smaller homes, modern science, and the concen-

trations of physicians around medical centers have influenced maternity practices. Hospitals have become safer and far more comfortable places in which to have babies. Even during the last ten years hospital deliveries have more than doubled. Often nurseries have been crowded far beyond safe capacity. Because of precedent and physical arrangement perfectly healthy and thoroughly interested mothers have been denied the privilege of participating to any extent in the care of their new babies.

A few years ago Mrs. Frances P. Simsarian, a patient of the late Dr. Howard F. Kane, professor emeritus of obstetrics and gynecology at the University, wanted her baby with her in her room. This request was granted. Mrs. Simsarian and her new baby had a perfectly agreeable time in the hospital. When it became known that the physicians and nurses of the hospital would cooperate

See *Babies*, Page 12



**THE WEE BABES**—Loving is part of the doctor's prescription for "pre-mies" who must stay in the Hospital's glass house, the premature nursery. Until they weigh out at 4½ to 5 pounds, these littlest babies are carefully fed and cuddled at least every 3 hours. Dad and mother can watch from outside that "glass curtain."

The nursery is air-conditioned for temperature and humidity, contains 8 incubators, each supplied with

pipled in oxygen. One hundred forty babies spent their first days here last year.

Staff Nurse Doris Turner is shown with Baby Boy Robert Edward Dudley, who was one day old when photographed at lunch time. The blue card, which was attached to his incubator, shows he weighed four pounds, ten ounces, and was a twin. Robert Edward and his twin brother, Thomas Arnold, are now at home keeping mother busy.







Courtesy Dr. George Nordlinger

**BRIDEWELL**—How times have changed from the primitive maternity room of 1808.

## Babies

(Continued from Page 10)

in this type of care, other mothers followed Mrs. Simsarian's example.

Nurses working with the newborn develop an uncanny faculty of foretelling what the behavior of babies will be after they go home. How often have we seen their predictions come true! They recognize the hungry infant, the lazy boy, the tense girl, the happy child and those with tempers!

They evaluate these qualities during the few short days in which they have these babies in charge. Under ordinary procedure the infants are in the nursery with the nurse for most of the hospital stay. They are fed, diapered, bathed and "prettied" by the nurse exclusively. This privilege has not been accorded the mother in hospitals in the past, and is accorded her in very few at the present time. She is the one person who so sorely needs this information for the future. She is the person who should be able to evaluate potential patterns of behavior as early as possible.

By the time plans were under way for the new University Hospital building, it was apparent to the staff that a

maternity service could and should provide all of the safety of an advancing science plus some of the security and comforts of home. Patients, parents, public health officials, obstetricians, pediatricians, nurses, architects, and hospital administrators were consulted. Many preliminary plans were discarded in an attempt to satisfy the requests of all mothers' for their new babies. Small nurseries became the centers around which the mothers' rooms were planned. Large view windows became an important part of each nursery. In their small, clean, clear cubicles each baby should be viewed at all times. Parents were to have a wide choice of accommodations for their baby, ranging from an eight crib nursery to a four crib nursery beside the mother's room and even single nursery-mother suites. This plan was enthusiastically sponsored by University President Cloyd H. Marvin, Dean Walter A. Bloedorn, who is medical director of the Hospital, and Mr. Waldron Faulkner and Mr. Slocum Kingsbury, the architects.

In addition, it was decided that the maternity division should have a modern delivery suite and an air conditioned premature nursery.

See *Babies*, Page 14



Federal Works Agency

**THREE CHOICES** — Mother can come to the hospital before baby is born and select that "very important patient's" room. It may be a private nursery located inside mother's room, a cubicle in a nursery shared with three other new infants and visible from mother's double room, or an eight cubicle nursery located a few steps away.

Mrs. Helen Chapline (above left)

says "Hello" to Baby Robert Williams Chapline who looks out of his private nursery from the arms of Nurse Edith Shor. From a double room Mrs. Kathleen Marusick and Mrs. Laurel E. Crumrine can see into the four bed nursery where Clifford Richard and Kenneth Z. Jr. are sleeping. Below, Mrs. Priscilla Dow looks into the eight bed nursery for her daughter, Diana Lynn.



Delaney



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there was born to Mary Susan and Paul Reed a Girl  
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the baby and the right thumb print of the mother were taken by John Parks  
John Parks M.D. Obstetrician John Parks Hospital Superintendent


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MOTHER'S RIGHT THUMB PRINT

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PINK IS FOR MARY SUSAN—The COURIER photographer caught Dr. and Mrs. Paul Reed going home from the Hospital—dad carrying the baby and mother the Hospital birth certificate. Then he borrowed the birth certificate and mounted the picture on it. Certificates in pink or blue are issued each new baby at the Hospital.

## Babies

(Continued from Page 12)

With the final floor plans underway, it seemed essential to improve on available equipment for mother and infant hospital care. Self adjusting beds were obtained for the mothers. A new mobile unit bassinet was designed which could be placed at the mother's bedside.

During the past 18 months the Hospital's Maternity Division has provided a new type of service to more than 3500 mothers and their infants. Babies are treated as individuals admitted to the Hospital by way of the delivery room. Each infant has its own hospital record, and individual hospital space.

Under the able direction of Mrs. Mary Kelly, maternity supervisor, a new philosophy of nursing care has developed.

Nurses have become pleasant instructors for the mothers as well as caretakers of the babies.

Visiting physicians and nurses from Bombay to Helsinki and from Canada to the Argentine have commented about the quiet, relaxed and cheerful atmosphere of the Maternity Division.

This spirit conveys itself to lay visitors, too. One was heard to remark recently, "Everywhere you look, someone is smiling and playing with a baby."

How parents feel about the new type of service for babies is voiced by Mrs. Thomas E. Drum, who came back to the Hospital this Fall for the birth of her second baby.

Mrs. Drum looked across her room at her three day old son sleeping in his private nursery and recalled the birth of

See *Babies*, Page 23

## Our Doctors Say . . .

"The theory that mothers with tumor ancestry should not nurse their infants for fear of transmitting the carcinogenic (cancerous) substance through the milk has not been proved in human beings. . . . The high percentage of patients who fail to nurse their infants has been presented as a problem for obstetricians, pediatricians, nurses, and hospital administrators to solve in a more physiologic and rational manner. . . . A majority of the complications of breast-feeding can be eliminated by careful attention to medical and nursing details. For mother and infant there is no perfect substitute for breast-feeding."

John Parks, M.D., professor of obstetrics and gynecology, IN: Medical annals of the District of Columbia, 18:389-393, August 1949.

"Quantitative studies of entozoic amoebae (single celled parasites living in the intestinal tract) in cultures are beset with a number of difficulties. . . . We have attempted to develop techniques which make it possible to estimate low density populations and improve the ease and rapidity with which this can be done. . . . Methods advocated in this report facilitate enumeration of entozoic amoebae in cultures and make possible concentration of cultures to a point where crude estimates may be made of yields of the order of 300 and statistically satisfactory counts may be obtained with yields of 3000. Accuracy is further increased by the clarity with which the amoebae stand out against the background."

"1. Undesirable debris can be eliminated from cultures of entozoic amoebae by using purified starch.

"2. Residual starch may be removed by treating the cultures with 10 per cent of formalin followed by heating to 70 degrees C. for 10 minutes.

"3. Manipulation results in a decrease in the absolute count but the relative counts remain constant.

"4. The effect of formalin on rice starch is not associated with the pH (acidity) of the system."

A. M. Griffin, Ph. D., professor of bacteriology, and W. G. McCarten, associate in bacteriology, IN: The Journal of parasitology, 35:193-198, April 1949.

"Procaine penicillin in oil as a means of prolonging therapeutic blood concentrations of penicillin appears to have certain advantages over penicillin in oil and wax. We have withdrawn and administered without difficulty procaine penicillin preparations with syringes sterilized by boiling which were damp when used. Procaine penicillin preparations maintain blood concentrations of penicillin which are adequate for most purposes."

Harry F. Dowling, M.D., clinical professor of medicine, IN: Journal of laboratory and clinical medicine, 33:1232-1240, October 1948.

"Psychiatrists have probably been interested in physical medicine longer than the practitioners of any other specialty. Even in the time of Hippocrates prolonged warm baths were recognized as of value in certain mental conditions. . . . Within the last ten years the almost undue attention paid to the electroconvulsive type of psychiatric therapy has diverted a good deal of attention from the better established methods of treatment, but it certainly has emphasized the usefulness of physical medicine in the field of psychiatry."

Winfred Overholser, M.D., professor of psychiatry, IN: American medical association: Journal, 138:1221-1222, December 25, 1948.

—SALLY BREWSTER JAMIESON



# Diabetes Under Control

By LOUIS K. ALPERT, B.S., M.D.

*Adjunct Clinical Professor of Medicine, School of Medicine  
Chief, Metabolism and Diabetic Clinic, University Hospital  
Chief, General Medical Service, Veteran's Administration Hospital (Mt. Alto)*



**JUST RIGHT**—Dr. Louis K. Alpert and Mrs. Lillian Carter are pleased with results of her diabetic diet. The scales show she has been eating the good foods to keep her well which are illustrated by the chart on the wall.

**I**N the year 1921 the world was thrilled by the news that insulin had been discovered. Diabetic patients eagerly looked with hope toward a brighter future when they might once again lead more normal lives.

That hope has been fully realized and today these diabetics have taken their places of prominence in the fields of science, government, sports, in fact everywhere on the same basis as non-diabetic individuals. You may be surprised to know that among diabetics are included a queen, a member of the Cabinet of the President of the United States, a champion tennis player and a famous football player. Many people who are prominent in the activities of Washington have diabetes, yet no one outside of their immediate families and their physicians is aware of that fact.

How was this great discovery made? In 1920, Dr. Frederick Banting, a Canadian country doctor, read an article in a medical journal which reported that diabetes had been produced in dogs by removal of the pancreas. It appeared obvious at once to Dr. Banting that the pancreas must be producing a substance which counteracted diabetes. He went to his former Professor of Physiology at the University of Toronto, Dr. Macloed, and asked if he might be allowed to work out his ideas in the laboratory.

He was given research facilities, dogs, and the assistance of Charles H. Best, who was then a medical student. They began their experiments in the Spring of 1921, and worked feverishly during that whole Summer. By the Fall of that year they knew that they had confirmed their hopes, and had isolated a substance which miraculously save the lives of their diabetic dogs. In November 1921 they made their announcement to the world, and the rest is history.

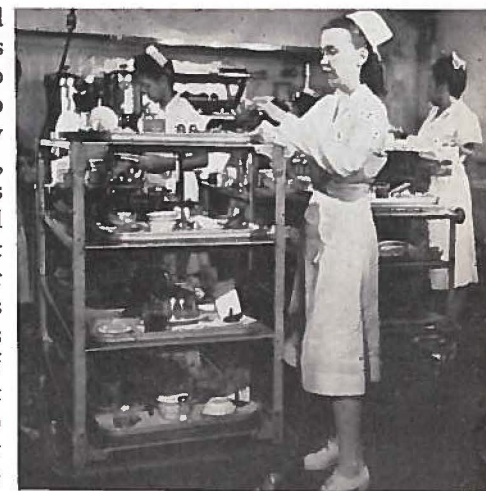
Now when we talk about diabetes, just what do we mean? We all know that it has something to do with sugar in the urine and an increased amount of sugar in the blood. When a normal person eats food containing starch or sugar, the blood sugar (glucose) rises a little as the food is absorbed from the intestinal tract, and then returns to the normal level in an hour or two. When a person who has diabetes eats the same food, his blood sugar rises to a much higher level, and is very slow in coming down again. When the sugar in the blood is at the high levels, it then appears in the urine. That is why one of the easiest ways of detecting diabetes is to test the urine for sugar one to two hours after a meal.

In a normal person, as soon as the blood sugar rises above normal, the pancreas is alerted and puts out more insulin into the blood. The sugar then starts to "burn" to produce the energy necessary for life. In a diabetic, on the other hand, when the blood sugar rises, the pancreas does not respond to the stimulus until much later, and is unable to put out sufficient insulin to allow for the proper oxidation of the sugar. The sugar is then lost in the urine, and since this amounts to the same thing as loss of food, the patient begins to lose weight and feels starved. If insulin is given to a diabetic along with his meals, the sugar in the blood can then be burned in the normal manner.

From what you have read thus far you can readily see that diabetes is due essentially to an insufficient production or utilization of insulin. Now you may ask, what causes this inadequacy? The answer is quite complex.



**HOW MUCH SUGAR?**—Technician Mary Evans will dilute the blood samples with water and use tungstic acid to take out the proteins. She will heat the remaining fluid with chemicals and use a machine known as a colorimeter to tell by the color of this fluid the amount of sugar present.



**DIABETIC PANTRY**—When diabetic persons are sick in the Hospital, their food trays are prepared in the diabetic pantry where Staff Dietician Geraldine Kunz and her helpers fulfill menus ordered by the patients' physicians.

First of all, we know that diabetes occurs more often in people who are overweight, and it can be corrected by returning to a normal weight.

Secondly, we know that diabetes tends to appear in more than one member of the same family, because of a hereditary factor.

Thirdly, recent experiments have shown that a hormone of the pituitary gland exerts a great influence on the action of insulin, and it is quite likely that the hormones of other endocrine glands also affect the metabolism of sugar.

What can anyone do to prevent the development of diabetes? Thus far, the only factors which we can control to any degree are weight and heredity. Since diabetes occurs more often in obese people, it behooves us then to keep our weights normal, simply by limiting our diets to that amount of food which we really need in order to supply the calories for the amount of work we do and the energy we use up.

The factor of heredity is more difficult to control, but this much can be said. If two people who have diabetes or a familial history of diabetes are married,





**BLOOD TEST**—Blood drawn in this manner will go to the laboratory for testing. It can be used to confirm the diagnosis of diabetes and also as a check on the diabetic patient's condition.

it is likely that their children will have diabetes. On the other hand, if a diabetic marries an individual in whose family there is no trait of diabetes, it is unlikely that the children will have diabetes. Therefore, although marriage should not be prohibited to a diabetic, inter-marriage between the families of diabetics should be discouraged.

The treatment of diabetes depends on the proper balance between diet, insulin and physical activity. Not all diabetics require insulin. Many can control their disease entirely by proper regulation of diet. However, the more severe diabetics must have insulin in order to live and be healthy. A recent news report stated that almost all diabetics can be treated without insulin. This was a most unfortunate misinterpretation of the facts. Insulin is a life-saving drug. In the past 20 years, insulin has prolonged the life

span of diabetic patients from 45 years to over 65 years.

At the George Washington University Hospital there is a large and very active Diabetic Clinic which is maintained for the care of patients who cannot afford care by private physicians and who are not under care elsewhere. The Clinic is staffed by eight physicians who are members of the University Faculty.

When the patients arrive in the morning, their blood and urine is tested for sugar, and they are interviewed and examined by the physicians. Since the complications of diabetes may involve the eyes, heart and blood pressure most frequently, these are checked carefully by the doctors.

Although the Clinic lacks a special dietician it is hoped that in the near future a dietician will be made available

See *Diabetes*, Page 25

## In Memoriam

The following recent gifts have been received for the hospital memorial fund:

In memory of Madame May Somary by Mrs. Gustav Emery.

In memory of Mrs. Katharine Kent Brown by Mrs. E. B. Davis and Miss Margaret Davis.

The Hospital Memorial Fund permits honoring of a loved one with the gift of a living memorial, and helps increase our hospital service to the Washington Community. Gifts may be addressed to the Superintendent's Office, The George Washington University Hospital, Washington Circle, Washington 7, D. C. Checks should be made to the G. W. U. Hospital Memorial. Mrs. Alexander Wetmore is chairman of the Women's Board committee which administers the fund.

### Mrs. Hilton Honors Husband In Bequest

A bequest in memory of her husband, Mr. Walter E. Hilton, local realtor, has been made to the Hospital by Mrs. Miriam Hilton.

Mrs. Hilton, who died last year after a long illness, directed that \$5000 be given The George Washington University Hospital through the Women's Board of the Hospital. She had been a member of the Board for many years.

Mrs. Hilton, was an assistant supervisor of music in the District of Columbia public schools, before her marriage in 1905 to Mr. Hilton. Mr. Hilton died in 1913.

She was for a number of years chairman of the National Symphony Orchestra's Public School Committee, was first vice president of the Friday Morning Music Club, and for 26 years was a Red Cross Gray Lady at Walter Reed Hospital.

### More Volunteers

Tassels, student honor society for sophomore women at the University, has adopted as one of its annual projects assisting in the Hospital's record department. Members of the society will help set up a new system of cross indexing diseases and operations for research purposes.

### Night Cancer Clinic Opened at Warwick

The University Cancer Clinic in the Helen L. and Mary E. Warwick Memorial at 1339 H St., N. W., has opened its first night clinic.

The night session is for diagnosis only and is open to persons for whom clinic visits during the day are a hardship.

Dr. Calvin Klopp, clinic director, says that Federal employees who can take annual leave are not accepted for night clinic, since the limited time is held for those whose families would suffer through loss of wages if they left their jobs, mothers who are unable to pay sitters and must wait until fathers come home to leave small children, or comparable cases.

Dr. Klopp points out that "these people are likely to ignore danger signs of cancer until it is too late to save their lives. That is why the University has decided to ask its employees to serve at night."

Night clinic examinations are held by appointment. Patients should call for appointments during the regular clinic hours, 9 a.m. to 5 p.m., at ST. 7800.

### Evening Shopping

The Hospital Gift Shop is open 11 a.m. to 7:30 p.m., Tuesday through Friday; from 11 a.m. to 5 p.m., Monday and Saturday; and 1 to 4:30 p.m., Sunday.



# About Our Authors . . .

## Dr. Preston A. McLendon

The friendly personality of the "country doctor," the distinction of a Southern gentleman, and the judiciousness of the specialist—Dr. Preston A. McLendon, professor of pediatrics.

Born in Wadesboro, N. C., Dr. McLendon received his B.S. from Wake Forest College. He left home to study for his M.D. at Columbia University in New York, afterwards interning for 1½ years at Bellevue Hospital. Dr. McLendon now laughingly says his degree is recognized below the Mason-Dixon line by his membership in the Southern Medical Association! He is active also in other professional organizations, the A.M.A., the American Academy of Pediatrics, the Society of Sigma Xi, and the District Medical Society.

Dr. McLendon came to the University in 1922. Previously he served a year as resident at Children's Hospital. His affiliation with this institution has been continuous since then, and he now holds the position of attending physician. His Navy duty during the first World War won him the DSC, the Navy Cross, the Croix de Guerre and "a lot of memories."

Under the guidance of Dr. McLendon, pediatrics has become a major department of the School of Medicine. The Hospital's new facilities for infant care were designed by Dr. McLendon and Dr. Parks. Dr. McLendon's interest in the normal development and maintenance of healthier children is the subject for his articles in medical journals.

He is a member of the Cosmos Club and Columbia Country Club. He "tried for many years to play golf," but finds that hunting or fishing with Mrs. McLendon and their son, Preston Jr., "brings a great deal more pleasure and is less work!" Since daughter Elizabeth's recent marriage, his eyes seem to twinkle



**VISITOR IN WHITE**—Dr. John Parks (left) and Dr. Preston A. McLendon (right) discuss the Maternity Department with one of many visitors from far away places, Dr. John Blakeley, director of obstetrics & gynecology, Guy's Hospital, London, England. A portrait of the late Dr. Howard S. Kane, formerly head of the University's Department of Obstetrics and Gynecology, hangs behind them in the doctor's lounge.

overtime, perhaps in anticipation of an increased pediatric practice!

Maybe Dr. McLendon can qualify as Baby Sitter!

## Dr. John Parks

His red ties and abundant knowledge are recognized whenever gynecologists meet. The Hospital staff knows Dr. John Parks as professor and chief of obstetrics and gynecology, who with Dr. McLendon planned one of the Nation's finest and most modern obstetrical departments.

Dr. Parks received his A.B., M.S., and M.D. degrees at the University of Wisconsin, where his interest in children was manifested in his doctoral thesis,

"The Crippled Child." At Madison he became a member of Nu Sigma Nu, a professional medical society. He stayed at the University of Wisconsin as Instructor of Medical Pathology.

He came to Washington as adjunct clinical professor in obstetrics and gynecology. In 1944 he became chief of these services at G.W.U.H. His professorship in the School of Medicine, also granted that year, requires close cooperation with the staff and students at Gallinger Municipal Hospital.

Dr. Parks has been distinguished by membership in The American Gynecology Society. He is a member of the American Association of Obstetrical, Gynecological and Abdominal Surgeons. He has served on the Board of Directors of the Washington House of Mercy and is a member of the medical advisory committee for the Washington Red Cross Blood Center of which Dr. Montgomery Blair is chairman.

Dr. Parks' interest in new techniques and other people's views on any medical subject makes him a frequent traveler to medical conferences where he is in demand as a speaker. Early next year he will go to Los Angeles to address the Post-graduate Assembly of Southern California, a trip he and Mrs. Parks look forward to making with their son, Johnny.

Dr. Parks says he has no hobby! Well, sir, what about the pictures you use with your lectures? Do your audiences know they were taken by you and your staff?

## Dr. Louis K. Alpert

Dr. Louis K. Alpert, adjunct clinical professor of medicine, has been engaged in the study of the diseases of metabolism and diabetes for many years, and is known in Washington for his activities in the District branch of the American Diabetes Association. The interest and enthusiasm with which he runs the diabetic clinic at the Hospital is typical of his expeditious pace.

Dr. Alpert became acquainted with the city during the war while stationed at Walter Reed where, in addition to his

## New Sewing Machine

An overedging sewing machine which will permit the housekeeping department to make necessary articles five or six times as fast as with an ordinary machine has been presented to the Hospital by the Women's Board. The new equipment cuts and sews in one operation, can take some 5500 stitches a minute, with a trimmer operating in advance of the needle.

other duties, he did experimental work with the use of mustard gas derivatives in the treatment of malignant growths. He decided to enter private practice here, and because of his earlier work with Dr. John P. Peters (New Haven) and Dr. Donald D. Van Slyke (New York) he made his specialty endocrinology, the study of the glands of internal secretion.

He was born in New York, but spent his youth in New Haven, Conn. Consequently the question of college had but one answer. Yale!

He earned his B.S. and M.D. degrees at "Old Eli." On graduation he married Dr. Inez Wilber. He stayed at Yale for three extra years of study in pathology, internal medicine (with Dr. Peters) and psychiatry.

He went to the University of Chicago as chief resident in medicine at Billings Hospital, and remained there as instructor in medicine when he received the Lasker Fellowship award.

In 1938 a National Research Council Fellowship took him to Rockefeller Institute in New York. Here he did research with Dr. Van Slyke on medical chemistry.

For four years before entering the Army he was an instructor in the medical department at Johns Hopkins Hospital in Baltimore, where he continued his clinical work and research.

His busy schedule and four year old daughter Louise leave Dr. Alpert with little extra time. Mrs. Alpert says he does enjoy listening to a symphony. He is also a good art critic. Unfortunately his own drawing days ended when he left college.

EILEEN MCINTYRE, R. N.



# Dr. Eliane Hoebeke Returns To Complete Anesthesia Course



Dr. Hoebeke

Once again the Surgical Staff of the Hospital welcomes it's favorite Belgian doctor—the former Dr. Eliane Hoebeke.

Dr. Hoebeke Boyer first came to the hospital in Oct. 1948 as a fellow in anesthesia, under the auspices of the American Association of University Women.

Her A.A.U.W. grant was awarded for the perseverance and scholastic ability she demonstrated while gaining her M.D. in war-torn Europe.

Three weeks after the enrollment in the University at Brussels, the German Army of Occupation closed the school. Teachers and students met in cellars, homes, any place a group of five or six could escape the watchful eye of the Nazis.

The University of Louvain, under Papal protection, afforded her two years of study. She re-entered the liberated University of Brussels for her final year. She interned at St. Peter's Hospital. Despite the strain and tension, lack of food and equipment, and her banned books, she passed with honors the medi-

cal examinations of her country two weeks before her twenty-fifth birthday.

Last year at the University Hospital she studied the advances and techniques of anesthesia that are lacking in Belgium. She became acquainted with new types of gases: nitrous oxide and ethylene, new ways of administration: endotracheal and intravenous, and with new machines.

She says these life saving machines are needed in Belgium because "they leave the good Lord free to watch over others." Her sense of humor was missed when in May 1949 she returned home to be married.

As Madame Doctor Boyer she returned in October to complete the course she started. Her husband, connected with the International Monetary Fund, is with her in Washington. They expect to be here at least another year, after which Mr. Boyer (not THE CHARLES but THE FRED) expects to be transferred to Paris. Then she will teach others to use the machines she takes back with her.

## Dr. Cox To Address International Congress

Dr. Ronald Atmore Cox, assistant clinical professor of ophthalmology, has been appointed by President of the University Cloyd H. Marvin to represent the University at the Sixteenth International Congress of Ophthalmology which holds its 50th meeting in London, July 17-21.

Dr. Cox will deliver a paper on "ocular brucellosis," which has to do with eye lesions as regards an infection prevalent in livestock. The Congress, which this year has as its patrons, Their Majesties, the King and Queen, attracts eye specialists from all over the world to its quadrennial meetings.



**THANKSGIVING TEA**—Mrs. David Williams, president of the new Junior Auxiliary of the Women's Board, shows a \$150 check to Mrs. Cloyd H. Marvin, Board president, and Mrs. Skipwith Coale, circulating library chairman. The occasion was the Board's Thanksgiving Tea in honor of the Junior Auxiliary. Some 300 books were donated during the tea, including a gift of 50 volumes presented in behalf of the Women's City Club by Miss Marguerite Griffin.

## Babies

(Continued from Page 14)

her daughter at the University Hospital a year before.

"I had never even been around a small baby, much less put on a diaper, but when I went home I had no worries. I got acquainted with my baby while I was still in the hospital. I learned to understand what he was crying about."

Mrs. Drum says that having the baby in view is "particularly nice for the father. We can look in together. My husband liked the idea."

At a time when science has removed major hazards and provided maximum comforts for childbirth, this Hospital and its staff are directing attention to a better understanding of babies. In the average family of today, young women do not have an adequate opportunity to learn much about infants. Under the friendly

## Hippocrates Comes To G. W. U.

A nine foot replica of a Greek statue of Hippocrates dating back to the fourth century B.C. has been given to School of Medicine.

The statue was presented to the University by Dr. Skevos Zervos, Greek authority on "the father of medicine," according to the University's curator of art, John Russell Mason. It is a copy of a statue found in the Dodecanese Islands which now stands in Athens and is depicted on one of the Greek postage stamps. Plans are to place the statue in Hall A of the School of Medicine.

guidance of physicians and nurses every effort is being made to substitute understanding for the uncertainties that parents frequently feel as they leave the hospital with their new baby.





**MEMORIAL**—Rabbi Solomon Metz (extreme left) unveiled a bronze plaque in memory of Mrs. Sarah Corenfield. At the ceremony were: (left to right) Rabbi Metz, Mrs. Everett Raffel (her daughter), Mrs. Ruth Albert, Mr. Corenfield (husband of the late Mrs. Corenfield) and Dr. Calvin Klopp.

## Women's Club Dedicates Cancer Memorial Plaque To Mrs. Corenfield

A bronze plaque in memory of Mrs. Sarah Corenfield, who died of cancer, was dedicated at The George Washington University Cancer Clinic in the Warwick Memorial.

The plaque was donated by the Women's Progressive Club which maintains in Mrs. Corenfield's name a special fund to aid needy cancer patients who cannot afford hospital costs. Mrs. Corenfield had been a member of the Club.

Rabbi Solomon Metz conducted a memorial service and unveiled the plaque. Dr. Calvin T. Klopp, director of the University's cancer activities, told those present for the ceremony that the Sarah Corenfield fund had already helped seven patients who could not afford to pay the cost of needed operations.

Friends and relatives, in addition to members of the Progressive Women's Club, were present for the ceremony. Members of the family present were Mr.

Max Corenfield, husband, and Mr. and Mrs. Everett Raffel, daughter and son-in-law of Mrs. Corenfield, all of Washington; two brothers, Messrs. George and Charles Clott and a brother-in-law, Mr. Louis Rapkin, all of Jersey City, N. J.

Mrs. Ruth Albert is president of the cancer fund committee of the Women's Progressive Club. Other officers are: Mrs. Ann Krockmal, vice president; Mrs. Frances Whitcup, secretary; and Mrs. Carolyn Kaplan, treasurer.

## Dr. Brown Is Named To Council Committee

Dr. Thomas McPherson Brown, professor of medicine, was appointed Vice Chairman of the Sub-committee on Medicine at the National Research Council.

Dr. A. McGehee Harvey, professor of medicine at Johns Hopkins University, is chairman of this committee which will continue work started during the war on chemical-biological coordination regarding certain substances used in clinical medicine.

## Diabetes

(Continued from Page 18)

who will instruct the new patients in the diets which are prescribed by the physicians, interview the patients at regular intervals to determine how closely they are following their diets, and will carry on classes for group instruction in the practical aspects of how to follow the diets with the food which is available in the markets. At the present time the patients are closely questioned by the physicians regarding any deviations from their prescribed diets.

An important adjunct to the Clinic are the services of three well trained podiatrists, who examine and treat the feet of every patient, to prevent the development of infections which are always a serious complication. It has been noted that during the past year not a single diabetic patient in the Clinic has developed any serious complications of the disease.

In a recent survey of the population of a small suburban town it was found that for every known diabetic patient there was discovered a previously unknown diabetic. It is apparent, therefore, that in addition to the million known diabetics in this country, there must be almost another million who have diabetes but do not know it. Obviously, they cannot be treated until they are discovered.

Therefore, the American Diabetes Association is conducting a nation-wide drive to find the unknown diabetic patients. All individuals are urged to have their urines tested either by their private physicians or at the nearest available clinic if the patient cannot afford to visit a private physician. There are also available certain testing units which may be purchased at drug stores for the purpose of allowing any person to test his own urine for sugar. In any instance

## Cancer Research Grants Awarded

Grants amounting to \$70,480 for cancer research at the Hospital were awarded the University in November by the Public Health Service and the American Cancer Society.

The Public Health Service grant of \$25,000 is the third made by this agency to the Medical School for its cancer education program.

The Cancer Society grant is composed of funds donated by Washingtonians in the annual campaign of the A.C.S., and will be used to provide x-ray therapy for indigent patients, a teaching program for medical students, and to further research at Warwick Memorial.

This grant provides, for the first time, money for x-ray therapy for those unable to pay for it. X-ray therapy is an important phase of cancer treatment in many patients and is a long and expensive process.

Medical students will take part in research under the new grant. Training will be in the University's laboratories with emphasis on diagnosis, treatment, and follow-up work on patients in the cancer ward.

The balance of the money will be used for detection, diagnosis, and treatment of patients at the University cancer clinic and to purchase laboratory facilities to aid in care of these patients. The University's cancer program is directed by Dr. Calvin Klopp.

where a positive test is obtained by any of these procedures, further examination may be necessary for proper evaluation in each case. Only in this way can serious illness and possible death from diabetic coma be prevented.



## 'Unequal Image' Now Diagnosed

That inexplicable migraine headache, car sickness, or dizziness which results because flat surfaces seem to tip may be the result of a condition now easily diagnosed by a precision instrument in the hospital's Eye Department.

The condition is known as "aniseikonia" which translates from the Greek to mean "unequal image." The instrument is known as the space eikonometer. It is a new and expensive piece of equipment, one of less than a dozen in the United States.

It measures to a finer degree than was possible before the ability of two eyes working together. If a person sees objects smaller with one eye than he does with the other, he is afflicted with aniseikonia. If the difference in vision between the two eyes can be measured, glasses can correct this difference and relieve the patient of discomfort.

Hospital authorities call the space eikonometer "another of the refinements in the prescribing of glasses." Besides being more exacting than other equipment previously used to diagnose aniseikonia, it can stand on a surface no larger than a typewriter table. Old equipment occupied most of a large room. Examination with the space eikonometer involves identification by a patient of the comparative nearness or distance from him of parallel lines which he views through polaroid lenses.

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## Prescribed Reading

THE DOCTOR WEARS THREE FACES

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In this book of 254 pages Mary Bard tells the story of a doctor's life from his wife's point of view. She takes her title from the anonymous little quatrain:

"Three faces wears the doctor: when first sought  
An angel's; and a god's the cure half wrought;  
But when, the cure complete he seeks his fee  
The devil looks less terrible than he."

With great humor and charm she writes of the everyday happenings of her life with her doctor husband from the time they first met until they have become an established family with three growing children. In each chapter some particular phase of a doctor's work is stressed as the story of their life progresses. We see clearly the three faces a doctor can wear, the one he keeps for family and close friends, the strictly professional one he shows to patients, and the eager student one he assumes as he studies any unusual symptom or phenomenon he meets in his practice or learns about at his medical meetings.

The amusing chapter titles and headings add to the humor and the doctor emerges as a warm-hearted human individual whose three faces jostle one another about at will. After all, doctors too are just people!

### Greens and Trees

Christmas trees and greens as well as gifts are available at a special holiday shop operated by the Women's Board at the Westchester Apartments, from 11 a.m. to 6 p.m. daily. The shop will be open from December 12 through New Year's.



**SILVER BRIGHT**—Focal point of the Women's Board Thanksgiving Reception was the tea service donated to the Hospital by the Board. Left to right (top), Mrs. Wilbur Carr; Mrs. Cloyd H. Marvin; Mrs. Gilbert Frankel; Mrs. Seymour Alpert; Mrs. Hertha McCully; Mrs. Alexander Wetmore; Mrs. Ruth Bennett; (center) Miss Ruth Hocker; Mrs. Victor Ludewig; Mrs. David Williams; Miss Virginia Kirkbride; and Mrs. Everett Johnson; (below) Mrs. Gilbert Grosvenor; Mrs. Ellis Bell Miller; Mrs. Walter Bloedorn; Mrs. Henry Alvah Strong; Mrs. Walter Miller; Mrs. Norman Anderson; Mrs. Dandridge Terrell; Mrs. John Brewer; and Mrs. Rufus Roll.

### Five Physicians Complete Twenty-Five Years Service

Five medical doctors were among the ten faculty members honored at the University's 1949 homecoming luncheon, October 29, at the Mayflower Hotel.

Representing the medical staff were: Walter Freeman, M.D., professor of neurology; Edward Lewis, M.D., clinical professor of pediatrics; John Hugh Lyons, M.D., clinical professor of surgery; John Alton Reed, M.D., assistant clinical professor of medicine; and Arch Lockhart Riddick, M.D., clinical professor of surgery.

Guest speaker at the luncheon was Gen. Patrick J. Hurley.

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